

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000004317

**Entity Name:** MEMORY FOR MEMORY, INC.

**Current Principal Place of Business:**

136 SANTA LUCIA DRIVE  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

PO BOX 3321  
PALM BEACH, FL 33480 US

**FEI Number:** 45-5206426

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KARL, SCHOELLER  
136 SANTA LUCIA DRIVE  
WEST PALM BEACH, FL 33405 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** KARL SCHOELLER

03/19/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSTD  
Name SCHOELLER, KARL  
Address 136 SANTA LUCIA DRIVE  
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR  
Name SCHOELLER, CORINNE  
Address 136 SANTA LUCIA DRIEV  
City-State-Zip: WEST PALM BEACH FL 33405

Title D  
Name KUSHMAN, GERALDINE  
Address 435 THORNE LANE  
City-State-Zip: LAKE FOREST IL 60045

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KARL SCHOELLER

PRESIDENT

03/19/2016

Electronic Signature of Signing Officer/Director Detail

Date